

C. V. A.

- Ischemic.
- Hemorrhagic.-intracerebral and subarachnoid.

Ischemic- carotid artery (80%) and vertebrobasilar (20%).

- Carotid – hemiplegia, hemi sensory loss and dysphasia.
- Vertebrobasilar - hemianopia, diplopia, and vertigo.

INVESTIGATIONS.

CT

Lumber puncture

Rbs

MGT

- Anticoagulation with aspirin when sah has been excluded by c.t.
- Blood pressure: do not lower in acute phase.

- Hydration and oxygenation: ivf indicated in first few hrs and thereafter n.g. tube if swallowing has not resumed.
- Blood glucose: Hyperglycaemia worsens cerebral infarct and functional outcome. Rbs $>7\text{mmol/l}$ shd be normalized with insulin.

PREVENTION OF COMPLICATIONS

- Chest infection- nurse semi erect, physiotherapy, antibiotics.
- Dehydration- n.g tube
- Seizures- oxygen, anticonvulsants.
- Urinary infection- condom catheter, avoid catheterization if possible, antibiotics.
- Pressure sores- frequent turning.
- Hyperglycemia- lower with insulin.